

GET HACK STORAGE

PRIVATE

DC DHS ERAP

Добрый день, надеюсь нынешняя ситуация никого не коснулась и со всеми всё в порядке ! Нам необходимо продолжать работу, поэтому приступаем к обзору следующей темы. DC DHS ERAP - если кратко, то всё та же помощь при аренде жилья (экстренная помощь) . В данном случае по штату Вашингтон.



Какая сумма данных выплат ? - Зависит от места проживания клиента (район) , размера квартиры/дома и кол-ва проживающих, так же от среднего годового заработка. Подробная таблица с суммами тут : <https://dhs.dc.gov/page/monthly-income-limits-fair-market-rent> (Приложим ссылку под статьей). Максимальная сумма - 5 месяцев аренды. Однако данные выплаты поступают если проживающий уже живёт в этой квартире/доме и ему не хватает денег на продление. Минус данной подачи в том, что вам придётся отрисовывать документы по оплате счетов за электричество или прошлых оплат за апартаменты и т.п. Так же могут быть проблемы с поиском подобного материала.

Есть ещё один вариант подачи, это запрос помощи на первый месяц аренды (когда проживающий только въезжает в апартаменты) + помощь со страховым депозитом. Это то, что я советую подавать. Суммы выплат здесь в 2-3 раза меньше. Не превышают сумму

оплаты за 1 мес аренды апартаментов, со страховым депозитом аналогично. То есть в среднем здесь вы получите 1-3к\$. Ещё один плюс данной подачи, что проживающему не обязательно быть в округе DC, можно подавать так же и тем кто живет в округе Принс-Джорджес, округ Монтгомери, округ Арлингтон и т.д. (См. по карте).

Ещё одно главное условие для подачи, кроме гео-расположение холдеров, это доход. Он должен быть ниже среднего. Подробная конкретная информация на их сайте - <https://dhs.dc.gov/page/monthly-income-limits-fair-market-rent> (так же, ссылка будет под постом).

Время рассмотрение : живая очередь + 10 дней. В среднем это 2 недели. За это время вы получите ответ о том, подходите ли вы под эту программу. Далее неделя на проверку документов (могут запросить всякие квитанции и т.п., как со стороны владельца, так и со стороны арендующего).

Процесс подачи : Переходим на карту нужных округов, ищем дома, ищем владельцев (Вся инфо о таких поисках есть в паблик канале), пробиваем BG, чтоб удостовериться в правильности данных. Далее берём любую фулку небогатого парнишки из штата (не округа, а штата, так как при подаче на помощь с 1м месяцем аренды он не обязан жить в DC на данный момент), это упростит нам поиски. Штат Washington, если что. Далее пробиваем данные и отрисовываем нужные документы.

Обязательные документы : (Для подачи на 1й месяц аренды)

- Договор аренды (берёте pdf из Google , вписываете ваши данные и ставите печать, можно нарисовать так же в google онлайн)
- Фото ID/DL/Pass

Необязательные документы : (Но если есть возможность, прикладываете, ускорит и увеличит шанс апрува)

- Документы из SSI, SSDI или соц. выплаты типа PUA. О том что холдер малообеспечен.
- Подтверждение получения гос. пособий по выписке из банка (за последние 30 дней) (её можно отрисовать)
- Если подаете на помощь с 1м месяцем аренды, то можете приложить справку о бездомности или выселении с прошлых апартаментов (тоже можно отрисовать)

Обязательные документы для владельца апартаментов :

- Подтверждение ID/DL + SSN
- Форма W-9 (отрисовываем)

Если подаёте не на первый месяц, то на будет дополнить комплект rental ledger.

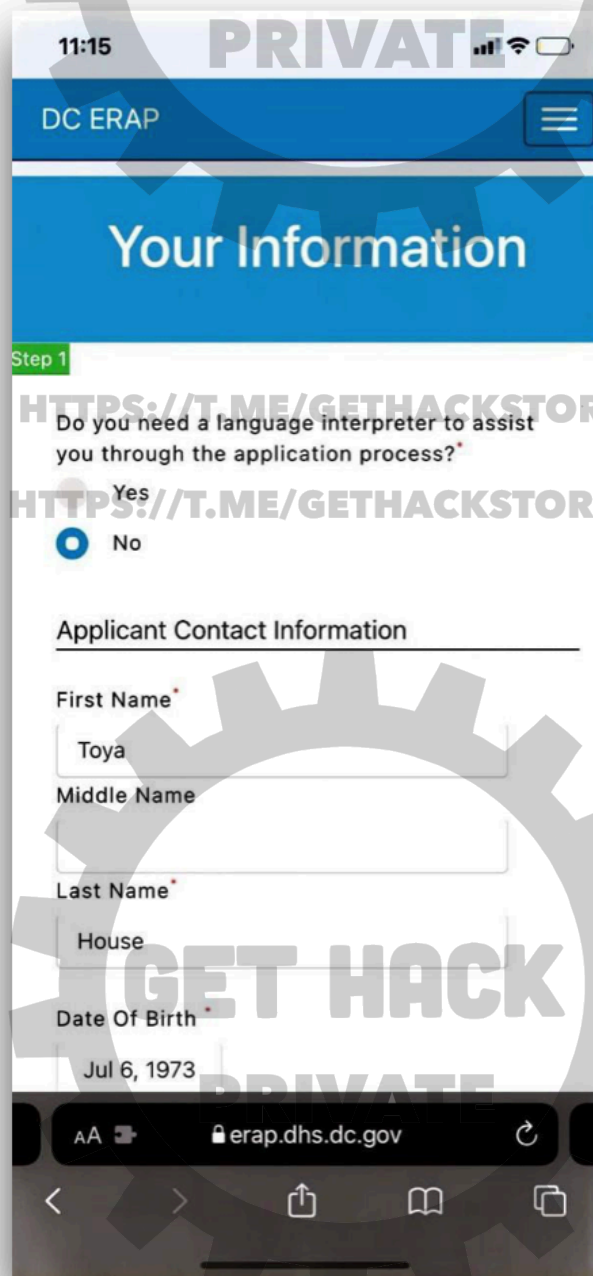
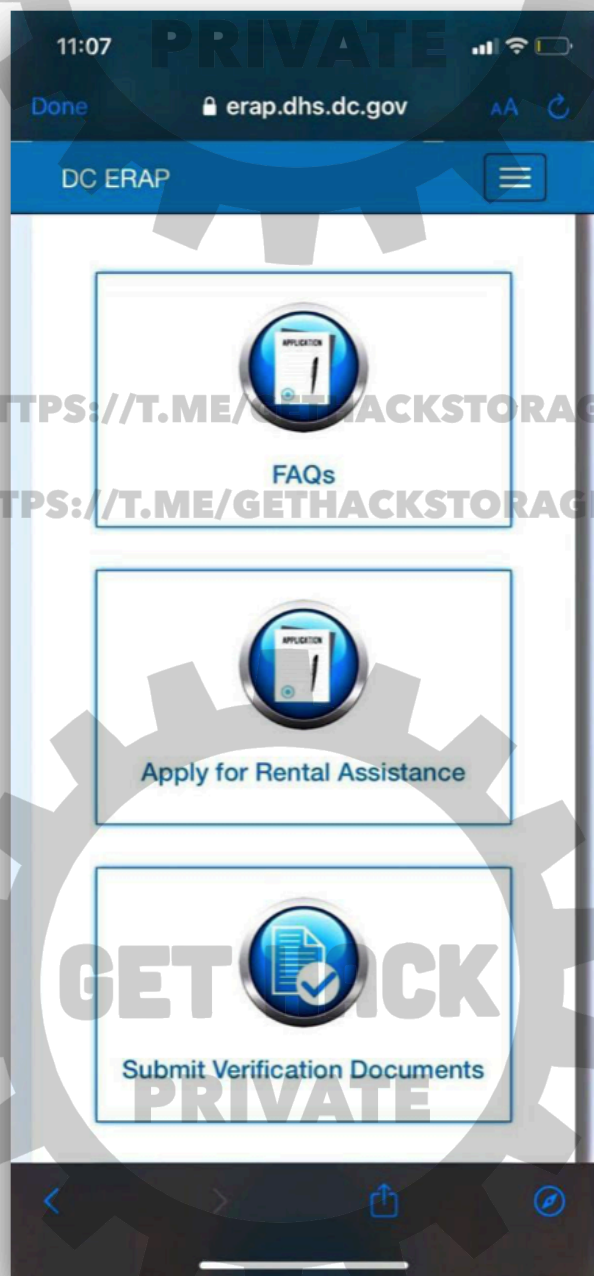
Процесс выплаты :

Выплаты идут или владельцам, или менеджерам. В нашем случае мы будем получать на владельца. Регистрируем БА на его фио и вписываем данные владельца в заявку. Выплаты придут на его счёт в течение 3-4 недель.

На этом в принципе всё, основные части разобрали, ниже приложу скрины пэндосов.

GET HACK

GET HACK



DC ERAP

Street Address *

3420 QUEBEC STREET NW

Unit

Ward (Find your ward [here](#)) *

3

Zip Code *

20016

City

Washington

State

District of Columbia

Email Address *

babyrixh@gmail.com

Home Phone Number *

4703544339

Cell Phone Number *

4703544339

What is the best way to reach you?

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DC ERAP

What is the best way to reach you?

Email

Home Phone

Cell Phone

Gender *

Female

Applicant Demographic Information

Race *

Black / African American

Ethnicity *

Hispanic/Latino

Not Hispanic/Latino

Declined To Answer

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DC ERAP

Step 2 of 10

Are you currently residing in the unit that you owe back rent for? (past due rent) *

Yes

No

Not Applicable/Not Applying for Back Rent

What type of rental property do you live in? *

Limited Equity Co-Op

Apartment Building

Single Family Home

What is your rental type? *

Leaseholder

Sub-leaser

Is your rental amount subsidized? *

DCHA Housing Choice Voucher (HCVP)

HUD Housing Assistance Program (HAP)

Family Rehousing Stabilization Program (FRSP)/Rapid Rehousing

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DC ERAP

Is your rental amount subsidized? *

DCHA Housing Choice Voucher (HCVP)

HUD Housing Assistance Program (HAP)

Family Rehousing Stabilization Program (FRSP)/Rapid Rehousing (RRH)

Not Subsidized

Other

Landlord Information

Landlord/Property Manager Name *

Yolanda Simms

Landlord Email Address *

babyfrmz6@icloud.com

Landlord Phone Number *

4703574553

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DC ERAP

Step 3 of 10

Do you have a WRIT notice of eviction? (Written Notice of Eviction not required for services)

Yes

No

Have you received emergency rental assistance from ERAP in the past 12 months?

Yes

No

Has your income and expenses been affected by COVID-19?

Yes

No

Has your income & expenses changed in the last 30 days?

Loss of income

Receiving or no longer receiving unemployment

Change in household: members leaving unit

Other

Please describe the change and your emergency below

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DC ERAP

Has your income & expenses changed in the last 30 days?

Loss of income

Receiving or no longer receiving unemployment

Change in Household: members leaving unit

Other

Please describe the change and your emergency below

No Longer Receiving UI Payment

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DC ERAP

Assistance Type	Amount	Time
Back Rent (April 1,2020 to present)	\$15,996.00	4

Does anyone in your household have a physical or mental disability, a medically documented incapacity, or extending illness to the extent that loss of existing housing would pose a serious threat to the health or safety for the family member?

Yes

No

Decline to Answer

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DC ERAP

Household Member Name	Date of Birth	Relation
Toya House	07/06/1973	Self

Please share your "monthly" household incomes below.

Net Income Source*

Cash App, Venmo, Paypal

Household Member with this Income*

Toya

Net Monthly Income from this Source*

\$ 1750

Monthly Income from this Source before taxes and deductions (if applicable)

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DC ERAP

Income Source Type Household Member Ne

Cash App, Venmo, Paypal Toya House \$1.

Does your household receive Food Stamps? (SNAP)*

Yes

No

Have you received any one-time assistance payments during the last 90 days?*

Yes

No

Do you expect your income to change in the next 30 days?*

Yes

No

Would you like to be referred to case management services for financial counseling?*

Yes

No

Does anyone live with you that pays their rent separately?*

Yes

No

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DC ERAP

Step 6 of 10

Do you or any of the members of your household have other resources or assets?*

Yes

No

Resource Type	Amount	Description	Account Number	Res Rec

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Step 7 of 10

Please list all your expenses in the next 30 days below (Do not list expenses that someone pays for you)

Expense Type*

Telephone

Amount*

\$ 80

Add Expense

Expense Type	Amount	Remove Rec
Rent	\$3,999.00	Delete
Car Note	\$609.00	Delete

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DC ERAP

Expense Type	Amount	Remove Rec
Rent	\$3,999.00	Delete
Car Note	\$609.00	Delete
Food (Cash Expenditures)	\$1,000.00	Delete
Gas Company	\$156.42	Delete
Water	\$114.48	Delete
Telephone	\$80.00	Delete

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DC ERAP

Have you tried to secure the funds you need to pay your housing costs from one or more of the following sources, prior to applying to ERAP?

- Friends
- Family
- Bank
- Private Charity
- Haven't sought assistance from other sources
- Declined to answer
- Other

If you checked 'Other' above, please provide more details below

How did you learn about ERAP?

- Referral from another social service provider
- Property Manager/ Landlord/ Coop Board
- Social Media
- DC Government Website
- Family/ Friend/ Community Member/
- Other

Do you expect any changes in your household during the next days?

- Yes
- No

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DC ERAP

Step 9 of 10

The following two documents are mandatory for all applicants:

- **Proof of residency** (lease, letter from landlord)
- **Photo ID** for all adults in household (current government issued ID such driver's license, passport).

The following documents are desired but not mandatory if you complete the self certification. Providing these documents will make completing your application easier:

- **Proof of Income** for last 30 days (paystubs, SSI, SSDI, unemployment benefits, retirement, child support, TANF). If you don't have income, you would need to sign a 0 Income Statement.
- **Proof of resources or benefits** (bank statement from the last 30 days for all accounts, SNAP).

If applying for First Month/Security Deposit: **Proof of Rental Agreement** such as an approval notice for the new unit you applied for and **Documentation of Need for Assistance** such as homelessness verification, notice of eviction or voucher for new unit.

Additional documents may be requested throughout the application process.

Please submit only PDF, MS Word Documents or Pictures (JPG, JPEG, PNG files) that are no more than 20MB in size

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DC ERAP

Please submit only PDF, MS Word Documents or Pictures (JPG, JPEG, PNG files) that are no more than 20MB in size

Document Type

Photo ID

Choose File 1 photo

Add Another Document

Submit

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DC ERAP

Submit Additional Documents

Document Type: Lease Agreement

Submitted On: 2/27/2022 11:46:04 PM

Document Type: Photo ID

Submitted On: 2/27/2022 11:44:37 PM

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DC ERAP

I Toya House certify that the information I provided in my Emergency Rental Assistance Program (ERAP) application dated 2022-02-27 is true, complete, and accurate to the best of my knowledge. I understand that an unsworn declaration made under penalty of perjury shall be considered sufficient documentation or proof to establish my eligibility for ERAP assistance.

CERTIFICATION OF RESIDENCY

I declare under penalty of perjury that I live in the District of Columbia. I am a tenant living at 3420 QUEBEC STREET NW. There are 2 bedrooms in my unit.

CERTIFICATION OF INCOME

I declare under penalty of perjury that my household income during the 30 days immediately preceding the date of my ERAP application was \$1,750.00. Each person in the household and their income is as below:

Income Source Type	Household Member
Cash App, Venmo, Paypal	Toya House

CERTIFICATION OF HOUSEHOLD SIZE

I declare under penalty of perjury that there are 1 adults and 0 children under the age of 18 living in my household

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DC ERAP

CERTIFICATION OF DISABILITY OR EXTENDED ILLNESS

I declare under penalty of perjury that a member of my household has a physical or mental disability or an extended illness such that loss of existing housing would pose a serious threat to the health or safety of the family member.

Name(s) of individual(s) with disability or extended illness:

CERTIFICATION OF ASSETS

I declare under penalty of perjury that my total household assets during the 30 days immediately preceding the date of my ERAP application was \$

CERTIFICATION OF EMERGENCY NEED

I declare under penalty of perjury that I fell behind in my rent as a result of

Loss of Income Receiving or no longer receiving unemployment, . No Longer Receiving UI Payment

I am taking steps to increase my income to support future rent payments. I do not have the resources to pay my back rent that is owed. I will accept a payment plan from my landlord for any remaining balance that cannot be paid by this assistance.

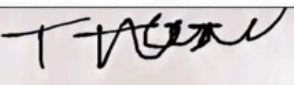
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DC ERAP

By signing below, I certify, under penalty of perjury, that the statements above and the contents of my ERAP application are true and accurate to the best of my knowledge. If I am unable to sign and complete this form, I authorize ERAP Organization staff to complete it and sign on my behalf during oral confirmation.

Applicant and/or Co-Applicant Signature



Applicant and any Co-Applicants, please sign your name using on touch screen devices. You must select Accept Signature below.

Please print your full name

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DC ERAP

Your Application(s)

Confirmation Number:	C652229984
Name:	Toya House
Status:	Submitted
Notice:	
Started:	2/27/2022 11:17:32 PM
Submitted:	2/27/2022 11:49:32 PM

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